F93000058607

Annual Report
Filed 6-15-95

2pgs.

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON 09/29/95 IF [illegible]

PROFIT CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 15 PM 12:02

DOCUMENT # F93000005867 (7)

1. Corporation Name
HOOTERS OF DUVAL II, INC.

Principal Place of Business	Mailing Address
4108 S 3RD ST STE. E-5110 JACKSONVILLE FL 32250 US	4501 CIRCLE 75 PARKWAY STE. E-5110 ATLANTA GA 30339

DO NOT WRITE IN THIS SPACE.

2. Date Incorporated or Qualified: 12/27/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3214578 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $5.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fee
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

21. Principal Place of Business	26. Mailing Address
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State	28. City & State
24. Zip / 25. Country	29. Zip / 30. Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	1.1 TITLE	☐ Change ☐ Addition
NAME	AKAM, RICHARD W	1.2 NAME	
STREET ADDRESS	4501 CIRCLE 75 PARKWAY, STE. E-5110	1.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30339	1.4 CITY-ST-ZIP	
TITLE	DST	2.1 TITLE	☐ Change ☐ Addition
NAME	ABBOTT, KENNETH L	2.2 NAME	
STREET ADDRESS	4501 CIRCLE 75 PARKWAY, STE. E-5110	2.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30339	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☒ Change ☐ Addition
NAME	~~BROOKS, ROBERT H~~	3.2 NAME	Delete
STREET ADDRESS	~~4501 CIRCLE 75 PARKWAY, STE. E-5110~~	3.3 STREET ADDRESS	
CITY-ST-ZIP	~~ATLANTA GA 30339~~	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard W. Akam 6/6/95 404-957-2040
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #

Document [illegible]